

EXHIBIT NO.

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9-14-02

Docket Item # 7

SPECIAL USE PERMIT #2002-0055

Planning Commission Meeting

September 3, 2002

ISSUE: Consideration of a request for a special use permit for a health and wellness facility (massage establishment).

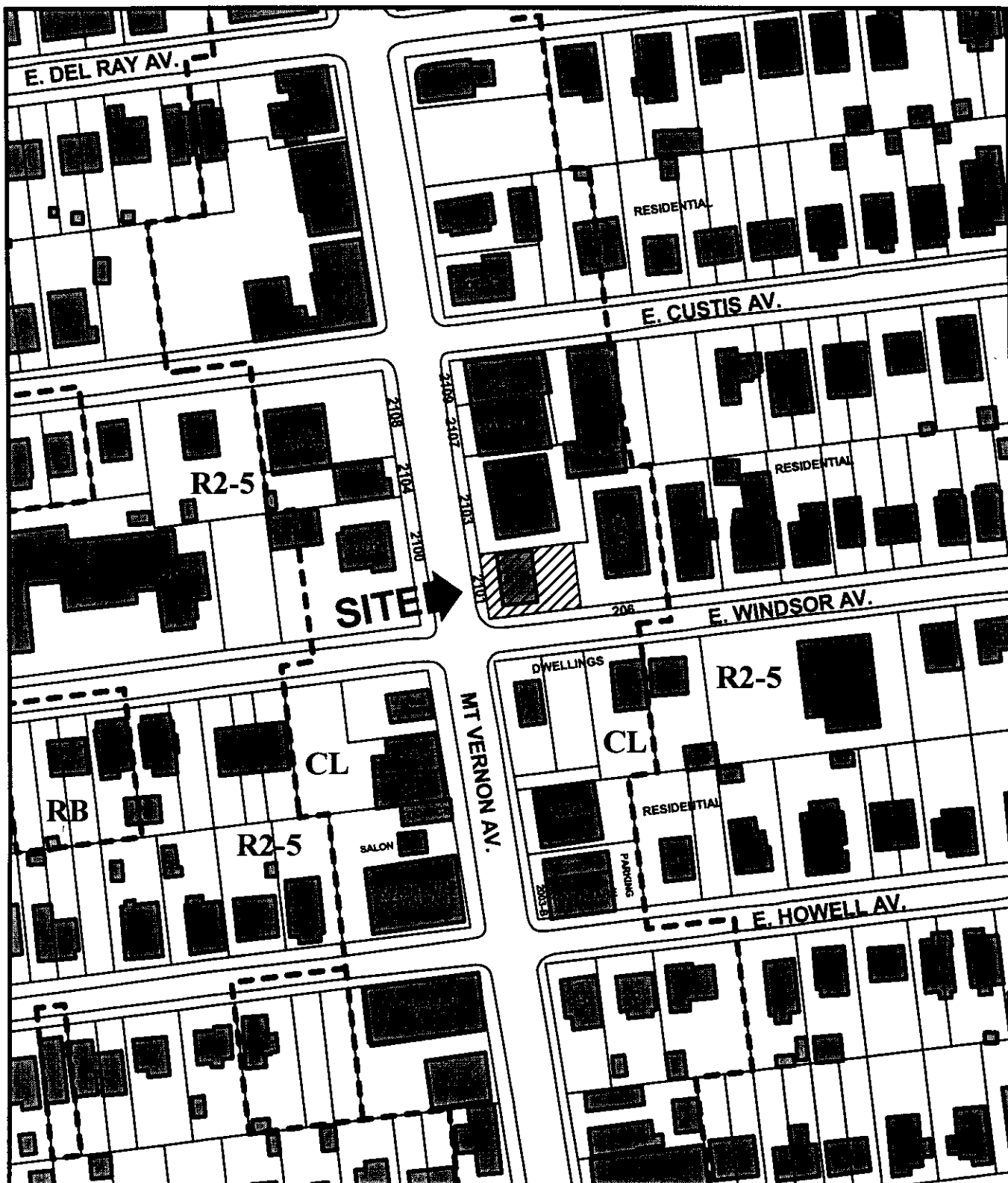
APPLICANT: Maryellen M. Thorp

LOCATION: 2101 Mt. Vernon Avenue

ZONE: CL/Commercial Low

PLANNING COMMISSION ACTION, SEPTEMBER 3, 2002: By unanimous consent, the Planning Commission recommended approval of the request, subject to compliance with all applicable codes, ordinances and staff recommendations.

Reason: The Planning Commission agreed with the staff analysis.



SUP #2002-0055

09/03/02



STAFF RECOMMENDATION:

Staff recommends **approval** subject to compliance with all applicable codes and ordinances and the following conditions:

1. The special use permit shall be granted to the applicant only or to any business or entity in which the applicant has a controlling interest. (P&Z)
2. Only City licensed therapists may provide massage services at the facility. (P&Z)
3. Employees who drive to work shall use off-street parking. (P&Z)
4. All exterior improvements to the property, including signage, shall comply with the Mount Vernon Avenue Design Guidelines. (P&Z)
5. The applicant shall contact the Crime Prevention Unit of the Alexandria Police Department for a security survey of the business and robbery awareness program for employees. (Police)

Staff Note: In accordance with section 11-506(c) of the zoning ordinance, construction or operation shall be commenced and diligently and substantially pursued within 18 months of the date of granting of a special use permit by City Council or the special use permit shall become void.

DISCUSSION:

1. The applicant, Maryellen M. Thorp, requests special use permit approval for the operation of a health and wellness center (massage establishment) located at 2101 Mt. Vernon Avenue.
2. The subject property is one lot of record located on the northeast corner of Mount Vernon and Windsor Avenues with 57.5 feet of frontage on Mount Vernon Avenue, 107.3 feet of depth and a total lot area of 4,074 square feet. The site is occupied by three two-story commercial townhouses. The proposed business is located on the first floor of the townhouse unit situated closest to the corner of Windsor Avenue. Other businesses in the townhouses include a hair salon, nail salon, and offices. Other business at the intersection include the Anne Welsh beauty salon on the northwest corner, Thai Peppers Restaurant on the southwest corner, and a single family home on the southeast corner. Behind the subject property is a residential condominium building.
3. The applicant is requesting special use permit approval to operate a health and wellness center offering massage therapy and acupuncture services. The applicant will have only one massage therapist or acupuncturist on the premises at a time. Clients will be seen by appointment only.
4. The applicant proposes to operate during the following hours:

<u>Day of the Week</u>	<u>Hours</u>
Monday through Friday	9:00 a.m. to 8:00 p.m.
Saturday	9:00 a.m. to 6:00 p.m.
Sunday	12:00 p.m. to 6:00 p.m.

The applicant anticipates having only one to two clients per day so she does not think that the business will be occupied during the entire time that is being requested. The doors to the business will be locked during appointments.

5. For calculating the parking requirement, the wellness center is considered an office use, operating much like a doctor's or dentist's office. Under Section 8-200 (A) (18) of the zoning ordinance, an office use at this location requires one parking space for every 450 square feet of floor area. In this case, the subject property has 290 square feet of floor area which results in the requirement of one parking space. The applicant has two spaces assigned to her business in the parking lot behind the building and, therefore, meets the parking requirement for the use. Signs will be posted at each parking space designating them for the business.

The parking lot currently has a large pot hole. The applicant has informed staff that the owner intends to fill the pot hole in the near future.

6. The applicant anticipates about two bags of trash per week that will be picked up from the dumpster behind the building. The applicant does not anticipate any noise or odors associated with the proposed use.
7. Zoning: The subject property is located in the CL/Commercial Low zone. Section 4-103 (G.1) of the zoning ordinance allows a massage establishment in the CL zone only with a special use permit.
8. Master Plan: The proposed use is consistent with the Potomac West small area plan chapter of the Master Plan which designates the property for commercial use.

STAFF ANALYSIS:

Staff does not object to the proposed health and wellness center located at 2101 Mount Vernon Avenue. The proposed use is compatible with existing businesses in the area. It is small, with a low number of clients and employees per day, and will not have any adverse impact on the area. Adequate off-street parking is designated behind the business. Staff recommends a condition requiring employees to park off the street so that the use does not add to the demand for on-street parking in the area.

Staff recommends approval of the request for special use permit subject to recommended conditions.

STAFF: Eileen P. Fogarty, Director, Department of Planning and Zoning;
Barbara Ross, Deputy Director;
Valerie Peterson, Urban Planner.

CITY DEPARTMENT COMMENTS

Legend: C - code requirement R - recommendation S - suggestion F - finding

Transportation & Environmental Services:

- F-1 Although the parking lot needs minor repair we do not believe this low impact use justifies the expense from the applicant. No T&ES objections or recommendations.

Code Enforcement:

- C-1 Alterations to the existing structure and/or installation and/or altering of equipment therein requires a building permit. Four sets of plans, bearing the signature and seal of a design professional registered in the Commonwealth of Virginia, must accompany the written application. The plans must include all dimensions, construction alterations details, kitchen equipment, electrical, plumbing, and mechanical layouts and schematics.
- C-2 When a change of use requires a greater degree of structural strength, fire protection, exit facilities or sanitary provisions, a construction permit is required.
- C-3 This structure contains mixed use groups and is subject to the mixed use and occupancy requirements of USBC ^[313.0.
- C-4 Required exits, parking, and bathroom facilities shall be accessible for persons with disabilities.

Health Department:

- C-1 An Alexandria Health Department Permit is required for all regulated facilities. Permits are non-transferable.
- C-2 This facility must meet current Alexandria City Code requirements for message establishments.
- C-3 Permits must be obtained prior to operation.

- C-4 Five sets of plans must be submitted to and approved by this department prior to construction. Plans must comply with the Alexandria City Code, Title 11, Chapter 4.2, prior to engaging in any massage activity.

Police Department:

- R-1 The applicant is to contact the Crime Prevention Unit of the Alexandria Police Department regarding a security survey for the center. This is to be completed prior to opening for business.
- R-2 Robbery awareness program for all employees.

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APPLICATION for SPECIAL USE PERMIT # 2002-0055

[must use black ink or type]

PROPERTY LOCATION: 2101 MT VERNON AVE Alexandria VA 22301-1311

TAX MAP REFERENCE: 34.04 - 0A - ZONE: CL

APPLICANT Name: Maryellen M Thorp

Address: 311 Hume Ave, Alexandria, 22301

PROPERTY OWNER Name: Jeffrey Biek

Address: _____

PROPOSED USE: Wellness Center - Massage Therapy -

Possible Acupuncture

THE UNDERSIGNED hereby applies for a Special Use Permit in accordance with the provisions of Article XI, Section 11-500 of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

THE UNDERSIGNED, having obtained permission from the property owner, hereby grants permission to the City of Alexandria to post placard notice on the property for which this application is requested, pursuant to Article XI, Section 11-301(B) of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

THE UNDERSIGNED hereby attests that all of the information herein provided and specifically including all surveys, drawings, etc., required to be furnished by the applicant are true, correct and accurate to the best of their knowledge and belief. The applicant is hereby notified that any written materials, drawings or illustrations submitted in support of this application and any specific oral representations made to the Planning Commission or City Council in the course of public hearings on this application will be binding on the applicant unless those materials or representations are clearly stated to be non-binding or illustrative of general plans and intentions, subject to substantial revision, pursuant to Article XI, Section 11-207(A)(10), of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

Maryellen Thorp
Print Name of Applicant or Agent

311 Hume Ave
Mailing/Street Address

Alexandria VA 22301
City and State Zip Code

Maryellen Thorp
Signature

(703) 599-9604 —
Telephone # Fax #

6-17-02
Date

===== **DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY** =====

Application Received: _____ Date & Fee Paid: _____ \$ _____

ACTION - PLANNING COMMISSION: _____

ACTION - CITY COUNCIL: _____

All applicants must complete this form. Supplemental forms are required for child care facilities, restaurants, automobile oriented uses and freestanding signs requiring special use permit approval.

1. The applicant is (check one) ☐ the Owner ☐ Contract Purchaser

☒ Lessee or ☐ Other: _____ of the subject property.

State the name, address and percent of ownership of any person or entity owning an interest in the applicant, unless the entity is a corporation or partnership in which case identify each owner of more than ten percent.

N/A Sole proprietor

If property owner or applicant is being represented by an authorized agent such as an attorney, realtor, or other person for which there is some form of compensation, does this agent or the business in which the agent is employed have a business license to operate in the City of Alexandria, Virginia?

☐ Yes. Provide proof of current City business license

☐ No. The agent shall obtain a business license prior to filing application, if required by the City Code.

2. Submit a floor plan and a plot plan with parking layout of the proposed use. One copy of the plan is required for plans that are 8½" x 14" or smaller. Twenty-four copies are required for larger plans or if the plans cannot be easily reproduced. The planning director may waive requirements for plan submission upon receipt of a written request which adequately justifies a waiver. This requirement does not apply if a Site Plan Package is required.

NARRATIVE DESCRIPTION

3. The applicant shall describe below the nature of the request in detail so that the Planning Commission and City Council can understand the nature of the operation and the use, including such items as the nature of the activity, the number and type of patrons, the number of employees, the hours, how parking is to be provided for employees and patrons, and whether the use will generate any noise. (Attach additional sheets if necessary)

See Attached

USE CHARACTERISTICS

4. The proposed special use permit request is for: *(check one)*

- ☒ a new use requiring a special use permit,
☐ a development special use permit,
☐ an expansion or change to an existing use without a special use permit,
☐ expansion or change to an existing use with a special use permit,
☐ other. Please describe: _____

5. Please describe the capacity of the proposed use:

A. How many patrons, clients, pupils and other such users do you expect? Specify time period (i.e., day, hour, or shift).

M-F 9:00^{AM} - 8:00pm 1-2 clients 1-2 Therapists.

SAT. 9:00^{AM} - 6:00pm 1-2 clients 1-2 Therapists Sun 12:00-6:00
1-2 clients
1-2 Therapists

B. How many employees, staff and other personnel do you expect? Specify time period (i.e., day, hour, or shift).

1 or 2 other Therapists Scheduling Appointments
Around my own.

6. Please describe the proposed hours and days of operation of the proposed use:

Day:

M-F

SAT

SUN

Hours:

9:00AM - 8:00pm

9:00am - 6:00pm

12:00 - 6:00pm

7. Please describe any potential noise emanating from the proposed use:

A. Describe the noise levels anticipated from all mechanical equipment and patrons.

None

B. How will the noise from patrons be controlled?

N/A

8. Describe any potential odors emanating from the proposed use and plans to control them:

N/A

9. Please provide information regarding trash and litter generated by the use:

A. What type of trash and garbage will be generated by the use?

Minimal -

B. How much trash and garbage will be generated by the use?

2 Bags A week

C. How often will trash be collected?

Dumpster

D. How will you prevent littering on the property, streets and nearby properties?

N/A

10. Will any hazardous materials, as defined by the state or federal government, be handled, stored, or generated on the property?

☐ Yes. ☒ No.

If yes, provide the name, monthly quantity, and specific disposal method below:

11. Will any organic compounds, for example paint, ink, lacquer thinner, or cleaning or degreasing solvent, be handled, stored, or generated on the property?

☐ Yes. ☒ No.

If yes, provide the name, monthly quantity, and specific disposal method below:

12. What methods are proposed to ensure the safety of residents, employees and patrons?

locking of front door during appointments.

ALCOHOL SALES

13. Will the proposed use include the sale of beer, wine, or mixed drinks?

☐ Yes. ☒ No.

If yes, describe alcohol sales below, including if the ABC license will include on-premises and/or off-premises sales. Existing uses must describe their existing alcohol sales and/or service and identify any proposed changes in that aspect of the operation.

PARKING AND ACCESS REQUIREMENTS

14. Please provide information regarding the availability of off-street parking:

A. How many parking spaces are required for the proposed use pursuant to section 8-200 (A) of the zoning ordinance?

B. How many parking spaces of each type are provided for the proposed use:

2 Standard spaces

X Compact spaces

X Handicapped accessible spaces.

_____ Other.

C. Where is required parking located? ☒ on-site ☐ off-site (check one)

If the required parking will be located off-site, where will it be located:

Pursuant to section 8-200 (C) of the zoning ordinance, commercial and industrial uses may provide off-site parking within 500 feet of the proposed use, provided that the off-site parking is located on land zoned for commercial or industrial uses. All other uses must provide parking on-site, except that off-street parking may be provided within 300 feet of the use with a special use permit.

D. If a reduction in the required parking is requested, pursuant to section 8-100 (A) (4) or (5) of the zoning ordinance, complete the PARKING REDUCTION SUPPLEMENTAL APPLICATION.

15. Please provide information regarding loading and unloading facilities for the use:

A. How many loading spaces are required for the use, per section 8-200 (B) of the zoning ordinance? N/A

B. How many loading spaces are available for the use? N/A

C. Where are off-street loading facilities located? N/A

D. During what hours of the day do you expect loading/unloading operations to occur?

N/A

E. How frequently are loading/unloading operations expected to occur, per day or per week, as appropriate?

N/A

16. Is street access to the subject property adequate or are any street improvements, such as a new turning lane, necessary to minimize impacts on traffic flow?

No

SITE CHARACTERISTICS

17. Will the proposed uses be located in an existing building?

☒ Yes ☐ No

Do you propose to construct an addition to the building?

☐ Yes ☒ No

How large will the addition be? _____ square feet.

18. What will the total area occupied by the proposed use be?

290 sq. ft. (existing) + _____ sq. ft. (addition if any) = 290 sq. ft. (total)

19. The proposed use is located in: (check one)

☐ a stand alone building ☐ a house located in a residential zone ☐ a warehouse

☐ a shopping center. Please provide name of the center: _____

☐ an office building. Please provide name of the building: _____

☒ other, please describe: Commercially Zoned Townhouse Type building

The proposed use of 2101 Mt Vernon Ave, Alexandria Va 22301 is a Wellness Center. I am a Nationally Certified Massage Therapist and Personal Trainer and have been working in Old Town for the last six years. My plan is to develop a small practice that includes Therapeutic Massage. Being relatively well established in the field of wellness therapy, I plan to use that information to possibly add an Acupuncturist as well as an additional Massage Therapist to utilize the Center.

2101 Mt Vernon Ave is an end unit of a commercially zoned Town House building. There is a parking lot behind the unit that is shared by all who lease space from the landlord. Two parking spaces are provided behind the building for use by 2101. There is a dumpster for garbage.

The space is comprised of two rooms, each 13 x 11 separated by French doors. The space has a ½ bath. It has a bay window overlooking Mt Vernon Ave. Normal business hours will consist of Monday – Friday 9:00am – 8:00pm, Saturday 9:00am – 6:00pm, Sunday 12:00 – 6:00pm. Clients will be seen by appointment only. And while the proposed operating hours are generous, I do not expect that the center will be occupied during the entire time.

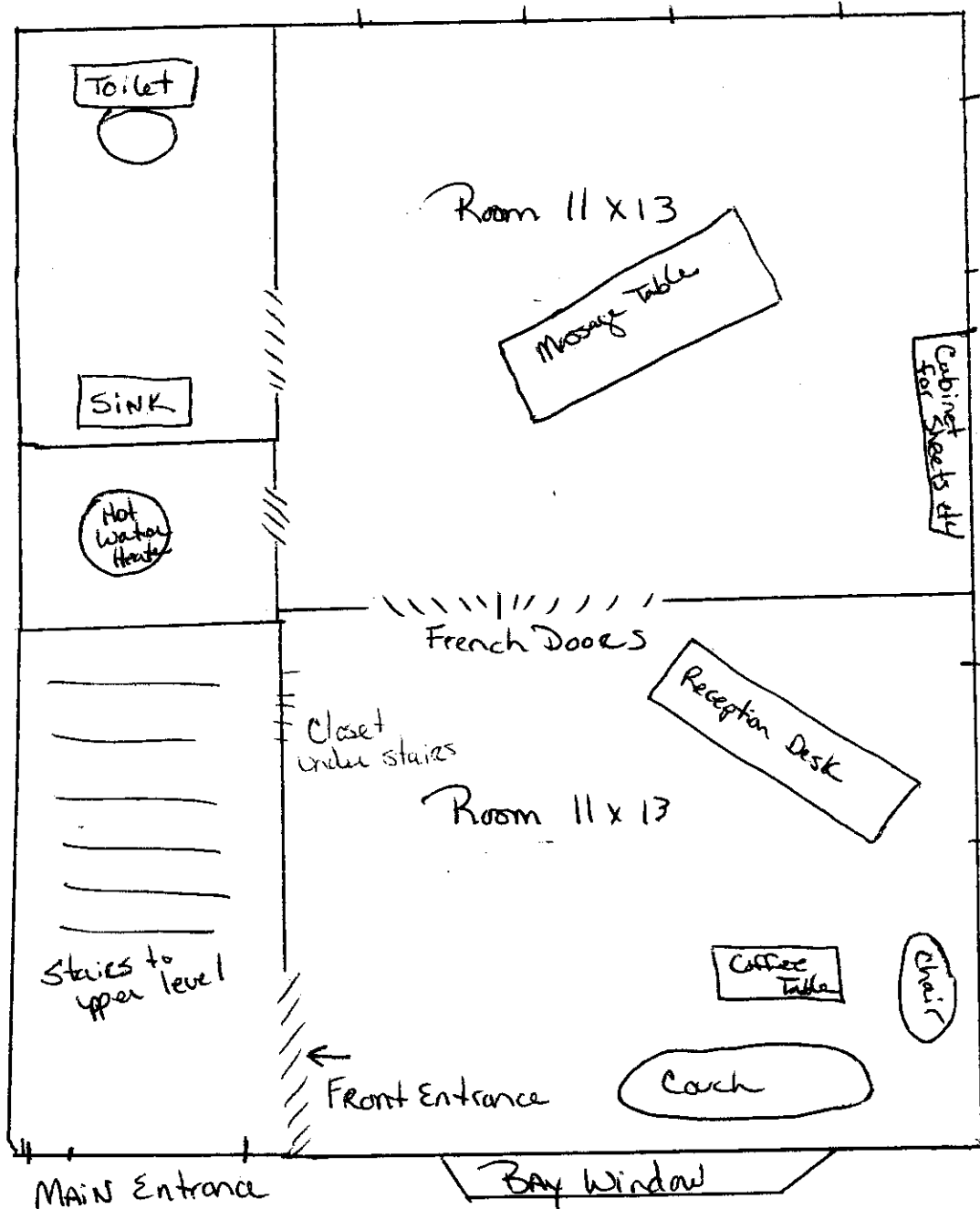
The parking spaces provided with the lease will be ample. At any time two to three people could be in the center, at least one of those being either myself or another therapist.

I expect no noise to be generated by this business

probably only one massage therapist would be conducting business at a time.

2101 MT Vernon Ave
Alexandria VA 22301 Parking lot

1. walls Are Drywalled
2. Commercial Grade Carpet on floors
3. over head lighting in both rooms



SUP 2002-0005

MT Vernon Ave

MP
APPLICATION for SPECIAL USE PERMIT # 2002-0055

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Maryellen Thorp
Print Name of Applicant or Agent

311 Hume Ave
Mailing/Street Address

Alexandria VA 22301
City and State Zip Code

Maryellen Thorp
Signature

(703) 299-9604
Telephone #

Fax # _____

6-17-02
Date

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

Application Received: _____ Date & Fee Paid: _____ \$ _____

ACTION - PLANNING COMMISSION: 9/3/2002 RECOMMENDED APPROVAL UC

ACTION - CITY COUNCIL: 9/14/02PH--SEE ATTACHED

REPORTS OF BOARDS, COMMISSIONS AND COMMITTEES (continued)

ACTION CONSENT CALENDAR (continued)

Planning Commission (continued)

5. Councilman Speck requested staff to correct language in condition #3 to make it consistent with all our language regarding parking.

City Council approved the Planning Commission recommendation.

6. City Council approved the Planning Commission recommendation.

7. City Council approved the Planning Commission recommendation.

8. City Council approved the Planning Commission recommendation.

9. Councilman Euille commented that St. Mary's School and VDOT had discussions underway for more than a year now in terms of reaching a negotiated settlement on the impacts of the Woodrow Wilson Bridge project on the school. He understands that those discussions have somehow gotten off track. Mr. Euille encouraged the City staff to do whatever it can to assist both parties to getting back to the table and hopefully seeking some type of reasonable solution to their discussions. The closing of this street will certainly have an impact not only on the entire neighborhood, but also St. Mary's School.

City Council approved the Planning Commission recommendation and authorized the appointment of viewers. Judy Lowe, chair, and Lee Roy Steel and Bill Brandon were appointed as viewers. (Separate Motion)

10. Councilman Speck noted condition #29 where it goes into some detailed language about employee training sessions. He was impressed with the way they have laid out some of the importance of educating the people that work there on the conditions and the significance of those conditions to the neighborhood and recognizing that this is a particularly important use. It's one with a long record of existing in that residential neighborhood. He thinks that some of the intent of that could easily be incorporated into a lot of our other special use permits, and he wanted to note that and ask if that is something that we can look at for other ones. It makes a lot of sense.

Planning and Zoning Deputy Ross stated that the language of that particular condition was worked out by the applicant, the North Ridge Civic Association, individual neighbors and staff. She agreed with Councilman Speck and thinks it's good. She thinks that staff can take the flavor and intent of it, capsulize it, and use it in other reports.

Councilman Speck thought it was good staff work and something it can discuss with Planning Commission to include with some of the applications received for restaurants, for example.

City Council approved the Planning Commission recommendation.

END OF ACTION CONSENT CALENDAR

Council Action: _____